



Genesee Education Consultant Services

**ADMINISTRATIVE GUIDELINES
FOR
BLOODBORNE PATHOGENS
AND
INFECTIOUS DISEASES
EXPOSURE CONTROL PLAN**

GECS EXPOSURE CONTROL PLAN

The Federal Occupational safety and Health Administration (OSHA) requires each employer having employees with occupational exposure to blood or other potentially infectious materials to develop an Exposure Control Plan (ECP). Occupational Exposure is defined under federal rules as reasonably anticipated skin, eye, mucous membrane, or parenteral contact (piercing of mucous membranes or the skin barrier through events as needle sticks, human bites, cuts and abrasions) with blood or other potentially infectious materials (OPIM) that may result from the performance of an employee's duties.

POLICY

The Genesee Education Consultant Services (GECS) is committed to providing a safe and healthful work environment for our entire staff. In pursuit of this endeavor, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens."

The ECP is a key document to assist our firm in implementing and ensuring compliance with the standard, thereby protecting our employees. This ECP includes:

- * Determination of employee exposure
- * Implementation of various methods of exposure control, including:
 - Universal precautions
 - Engineering and work practice controls
 - Personal protective equipment
 - Housekeeping
- * Hepatitis B vaccination
- * Post-exposure evaluation and follow-up
- * Communication of hazards to employees and training
- * Recordkeeping
- * Procedures for evaluating circumstances surrounding an exposure incident

The methods of implementation of these elements of the standard are discussed in the subsequent pages of this ECP.

PROGRAM ADMINISTRATION

* GECS Human Resources are responsible for the implementation of the ECP. GECS Human Resources will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures.

Contact location/phone number: 810-396-1100

* Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.

* The contracted school districts will maintain and provide all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and red bags as required by the standard. *The contracted school districts* will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes.

* GECS Human Resources will be responsible for ensuring that all medical actions required are performed and that appropriate employee health and OSHA records are maintained.

Contact location/phone number: 810-396-1100

* GECS Human Resources will be responsible for training, documentation of training, and making the written ECP available to employees, OSHA, and NIOSH representatives.

Contact location/phone number: 810-396-1100

EMPLOYEE EXPOSURE DETERMINATION

The following is a list of all job classifications at our establishment in which **all** employees have occupational exposure:

JOB TITLE

Adaptive Physical Education Teacher
After School Program Facilitator
Assistant Principal
Attendance Liaison Officer
Bus Aide
Bus Driver
Bus Driver-Standby Employee
Certified Occupational Therapist Assistant (COTA)
Child Associate
Child Care Aide
Classroom Aide, Special Education Programs
Club Leader
Consultant for Behavior Support
Coordinator of Nutrition and Health Services
Coordinator of Parenting and Early Childhood Programs
Coordinator of Student Programs for Expanded Learning
Culinary Educator
Custodial Aide
Custodial and Maintenance Supervisor
Custodian
Dental Health/Education Facilitator
ESL Tutor
Family Advocate
General Maintenance Coordinator

Health and Safety Facilitator
Health Care Assistant
Health Care Liaison
Health Clinic Supervisor
Homeless School
Liaison Homemaker/Parent Aide
Licensed Practical Nurse
Ligon Outdoor Center Ranger
Middle College Coordinator
Music Therapist
Nutrition Advocate
Nutrition Education Facilitator
Nutrition Educator
Occupational Therapist
Outdoor Education Facilitator
Para-Educator/Sign Language Aide
Para-Educator, Special Education Programs (including Behavior Support) Parent Educator
Parent Liaison
Physical Therapist Assistant
Physical Therapist
Primary Project Coordinator
Principal (all programs)
Program Secretary all programs,
Project Specialist
School and Community Liaison
School Nurse
School Social Worker
School Psychologist
Secretary
Shared-Time Maintenance/Custodial Coordinator
Shared-Time Transportation Training Specialist
Summer Program Assistant
Summer Recreation/Day Camp Coordinator
Summer Recreation/Day Camp Group Leader
Teacher of Students with Autism Spectrum Disorder
Teacher of Students with Cognitive Impairment
Teacher of Students with Emotional Impairment - Day Treatment Program
Teacher of the Emotionally/Mentally Impaired
Teacher of the Homebound and Hospitalized, Special Education
Teacher of the Speech and Language Impaired Teacher Consultant for the Hearing Impaired Teacher
Consultant for the Emotionally Impaired
Teacher Consultant for Students with Autism Spectrum Disorder
Teacher Consultant for Students with Disabilities
Teacher Consultant for Students with Disabilities, Early Childhood
Teacher Consultant for Students with Physical and Other Health Impairments Teacher Consultant for the
Visually Impaired/Orientation & Mobility Specialist Teen Facilitator
Tutor, Homeless/Runaway Students Transition Coordinator
Transportation Aide
Transportation-Sign Language Aide
Transportation Safety Trainer Transportation Services Coordinator
Transportation Supervisor
Tutor
Site Coordinator
Student Assistance Facilitator
Substitutes for any of the positions in the above job descriptions, i.e., substitute bus drivers, substitute
transportation aides, substitute secretaries in classroom buildings.

Youth Development Professional

The following is a list of job classifications in which **some** employees at our establishment have occupational exposure. Included is a list of tasks and procedures, or groups of closely related tasks and procedures, in which occupational exposure may occur for these individuals:

JOB TITLE

Accountant I and II
Administrative Secretary
Applications Support Specialist Applications Analyst
Business Services Administrator
Career Preparation/Work Program Developer
College Co-op
College Co-op, Music
Coordinator, English as a Second Language
Coordinator, Research, Evaluation and Assessment
Coordinator for Financial Grant Fund Management and Budget Development Coordinator for Instruction (Early Literacy, Reading Recovery, Social Studies)
Coordinator of Accounting and Business Services Manager
Data Entry Clerk
District Courier
Executive Assistant to the Superintendent
Executive Director, Communications and Development
Finance and Grant Funds Manager
Grants Development Coordinator
Graphics Assistant Graphics Specialist High School Co-op
Human Resources Administrator
Instructional Materials Designer
Instructional Media Coordinator Instructional Technologist Manager
Information Systems Materials Clerk/Typist
Materials Handler
Network Operations Engineer
Network Operations Specialist PC/Equipment Support Technician
Program Secretary
Project Coordinator
Project Specialist I
Project Specialist II
Pupil Accounting Auditor
Pupil Accounting Services Facilitator
Research Assistant
Secretary
Staff Accountant
Supervisor, Student Data Management
System Operations Engineer
Systems Specialist
Technical Services Administrator
Video Specialist

Part-time, temporary, contract and per diem employees are covered by the standard. How the provisions of the standard will be met for these employees should be described in the ECP.

METHODS OF IMPLEMENTATION AND CONTROL

Universal Precautions

All employees will utilize universal precautions.

Exposure Control Plan

Employees covered by the bloodborne pathogens standard receive an explanation of this ECP during their initial training session. It will also be reviewed in their annual refresher training. All employees have an opportunity to review this plan at any time during their work shifts by contacting GECS Human Resources.

GECS Human Resources are responsible for reviewing and updating the ECP annually or more frequently if necessary to reflect any new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

Engineering Controls and Work Practices

Engineering controls and work practice controls will be used to prevent or minimize exposure to bloodborne pathogens. The specific engineering controls and work practice controls used are listed below:

1. Handwashing:

- a. The contracted school district shall provide handwashing facilities which are readily accessible to employees, or when provision for handwashing facilities is not feasible, this district shall provide either an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes.
- b. Employees shall wash hands or any other skin with soap and water, or flush mucous membranes with water immediately or as soon as feasible (but prior to contact with others) following contact of such body areas with blood or other potentially infectious materials.
- c. Employees shall wash their hands immediately or as soon as feasible (but prior to contact with others) after removal of gloves or other personal protective equipment. When antiseptic hand cleaners or towelettes are used, hands shall be washed with soap and running water as soon as feasible.

2. Housekeeping and Waste Procedures:

- a. The contracted school district shall ensure that the worksite is maintained in a clean and sanitary condition.

The contracted school district shall determine and implement an appropriate written schedule for cleaning and method of decontamination based upon the location within the facility(ies), type of surface to be cleaned, type of soil present, and tasks or procedures being performed.

b. All equipment, materials, environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials.

i. Contaminated work surfaces shall be decontaminated with an appropriate disinfectant immediately after completion of procedures/task/therapy, or as soon as feasible (but prior to contact with others), when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials, and at the end of the school day if the surface may have become contaminated since the last cleaning.

ii. Protective coverings, such as plastic wrap, aluminum foil, or imperviously-backed absorbent paper used to cover equipment and environmental surfaces, shall be removed and replaced as soon as feasible when they become contaminated with blood or OPIM, or at the end of the school day if they have been contaminated since the last cleaning.

c. All bins, pails, cans, and similar receptacles intended for reuse which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials shall be inspected and decontaminated on a regularly scheduled basis and cleaned and decontaminated immediately or as soon as feasible upon visible contamination.

d. Materials, such as paper towels, gauze squares or clothing, used in the treatment of blood or OPIM spills that are blood-soaked or caked with blood shall be bagged, tied and designated as a biohazard. The bag shall then be removed from the site as soon as feasible and replaced with a clean bag. In this district, bags designated as biohazard (containing blood or OPIM contaminated materials) shall be red in color or affixed with a biohazard label and shall be located in garbage cans (i.e., no-touch lids) for red bag items.

(On the advice of MIOSHA, biohazardous waste for this Standard's purpose shall only include items that are blood-soaked, caked with blood or contain liquid blood that could be wrung out of the item. This would also include items such as sharps, broken glass or plastic on which there is fresh blood.)

e. The custodian shall respond immediately to any major blood or OPIM incident so that it can be cleaned, decontaminated, and removed immediately.

A major blood or OPIM incident is one in which there will be biohazardous material for disposal.

f. In this district, there shall be a marked biohazard container in the designated area for the containment of all individual biohazard designated bags. Disposal of the contents of this container will be implemented according to program needs.

g. In the event that regulated waste leaks from a bag or container, the waste shall be placed in a second container, and the area shall be cleaned and decontaminated.

h. Broken glass shall NOT be picked up directly with the hands. It shall be cleaned up using mechanical means, such as a brush and dust pan, tongs, or forceps. Broken glass shall be containerized.

i. Contaminated sharps, broken glass, plastic or other sharp objects shall be placed into appropriate sharps containers. In this district, the sharps containers shall be closable, puncture resistant, labeled with a biohazard label, and leak proof. Containers shall be maintained in an upright position. Containers shall be easily accessible to staff and located as close as feasible to the immediate area where sharps are used or can be reasonably anticipated to be found, i.e., custodial work area, nurses station. If an

incident occurs where there is contaminated material that is too large for a sharps container, the custodian shall be contacted immediately to obtain an appropriate biohazard container for this material.

i. This district shall provide to appropriate employees sharps self-sheathing needles, needleless systems disposal containers or safer medical devices that isolate or remove the bloodborne pathogen hazard from the workplace.

ii. In this district, the employee shall notify the custodian when sharps containers become three-quarters full so that they can be disposed of properly.

iii. Contaminated needles shall not be bent, recapped, removed, sheared or purposely broken.

iv. Any sharps injury must be logged on Appendix L after completion of the Report of Accident/Injury/Communicable Disease form (employee handbook)

j. Disposal of all regulated waste shall be in accordance with applicable regulations of the United States, States of Territories, and political subdivisions of States and Territories.

k. Employees are prohibited from eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses where there is a reasonable likelihood of exposure to blood-borne infectious diseases.

l. Employees shall NOT share water bottles, make-up, reeds from wind instruments, or allow students to do so. Employees will be warned against putting toothpicks, pens, pencils, or other potentially contaminated sharp items in their mouths.

m. Food and drink shall not be kept in refrigerators, freezers, cabinets, or on shelves, counter-tops or benchtops where blood or other potentially infectious materials are present.

n. All procedures involving blood or other potentially infectious materials shall be performed in such a manner as to minimize splashing, spraying, splattering, and generation of droplets of these substances. Mouth pipetting/suctioning of blood or OPIM is prohibited.

o. Specimens of blood or other potentially infectious materials shall be placed in containers which prevent leaking during collection, handling, processing, storing, transporting, or shipping. These containers shall be labeled with a biohazard symbol or are red in color.

p. Equipment which may become contaminated with blood or other potentially infectious material is to be examined prior to servicing and shipping and is to be decontaminated, if feasible. If not feasible, a readily observable biohazard label stating which portions are contaminated is to be affixed to the equipment. This information is to be conveyed to all affected employees, the service representative, and/or manufacturer, as appropriate, prior to handling, servicing or shipping. Equipment to consider: wheelchairs, student's communication device, vocational equipment needing repair, etc., after an exposure incident.

q. Contaminated laundry shall be handled as little as possible with a minimum of agitation.

Gloves must be worn when handling contaminated laundry. Contaminated laundry shall be bagged or containerized at the location where it was used and shall not be sorted or rinsed in the location of use. Containers must be leak-proof if there is reasonable

likelihood of soak-through or leakage. All contaminated laundry shall be placed and transported in bags or containers that are biohazard-labeled or colored red. In this district, contaminated laundry shall be placed in and washed in the designated area immediately, or as soon as feasible in accordance with district health procedures. Contaminated laundry that is to be sent to a commercial establishment for cleaning shall also meet the above requirements for biohazardous material.

Personal Protective Equipment (PPE)

1. When it has been determined by district health care professionals and designated administrators that occupational exposure remains after institution of engineering and work controls, personal protective equipment shall be used. Forms of personal protection equipment available are gloves, smocks, face shields, and other equipment deemed necessary.
 - a. Gloves shall be worn when it can be reasonably anticipated that the employee may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin; and when handling or touching contaminated items or surfaces.
 - b. Disposable gloves shall be replaced immediately when contaminated or if they are torn, punctured, or when the ability to function as a barrier is compromised. Disposable gloves shall NOT be washed or decontaminated for re-use.
 - c. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives shall be readily accessible to those employees who are allergic to the gloves normally provided.
 - d. Utility gloves may be decontaminated for re-use if the integrity of the glove is not compromised. However, they must be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.
 - e. Masks, in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin-length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated, i.e., custodian cleaning a clogged toilet, employees that are performing suctioning or tube feedings.
 - f. Appropriate protective clothing such as, but not limited to, smocks, gowns, aprons, lab coats, clinic jackets, or other similar outer garments shall be worn in occupational exposure situations. The type and characteristics shall depend upon the task, location, and degree of exposure anticipated.
2. This district shall ensure that appropriate personal protective equipment in the appropriate sizes is readily accessible at the worksite or is issued to the employees. Personal protective equipment is available in designated areas. Personal protective equipment shall be given to all designated individuals.
 - a. This district shall clean, launder and dispose of personal protective equipment, at no cost to the employee.
 - b. This district shall repair or replace personal protective equipment as needed to

maintain its effectiveness, at no cost to the employee.

3. All contaminated personal protective equipment shall be removed prior to leaving the work area. When personal protective equipment/supplies are removed they shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal. This container shall be labeled with a red biohazard symbol.

4. If a garment(s) is penetrated by blood or other potentially infectious materials, the garment(s) shall be removed immediately, or as soon as feasible, but prior to contact with others.

5. This district shall ensure that the employee uses appropriate personal protective equipment.

6. This district's review of new or prospective safety options will be completed annually.

HEPATITIS B VACCINATION

GECS Human Resources will provide training to employees on hepatitis B vaccinations, addressing the safety, benefits, efficacy, methods of administration, and availability.

The hepatitis B vaccination series is available at no cost after training and within 10 days of initial assignment to employees identified in the exposure determination section of this plan. Vaccination is encouraged unless:

- 1) documentation exists that the employee has previously received the series,
- 2) antibody testing reveals that the employee is immune, or
- 3) medical evaluation shows that vaccination is contraindicated.

However, if an employee chooses to decline vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal of the vaccination is kept at contracted school district.

Vaccination will be provided by clinic chosen by contracted school district.

Following the medical evaluation, a copy of the health care professional's Written Opinion will be obtained and provided to the employee. It will be limited to whether the employee requires the hepatitis vaccine, and whether the vaccine was administered.

POST-EXPOSURE EVALUATION AND FOLLOW-UP

Should an exposure incident occur, contact GECS Human Resources at the following number: 810-396-1100

An immediately available confidential medical evaluation and follow-up will be conducted by (*Licensed health care professional*) . Following the initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

- * Document the routes of exposure and how the exposure occurred.
- * Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).
- * Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's health care provider.
- * If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
- * Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- * After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status
- * If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

GECS Human Resources ensures that health care professional(s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA's bloodborne pathogens standard.

GECS Human Resources ensures that the health care professional evaluating an employee after an exposure incident receives the following:

- * a description of the employee's job duties relevant to the exposure incident
- * route(s) of exposure
- * circumstances of exposure
- * if possible, results of the source individual's blood test
- * relevant employee medical records, including vaccination status

GECS Human Resources provides the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING

AN EXPOSURE INCIDENT

GECS Human Resources will review the circumstances of all exposure incidents to determine:

- * engineering controls in use at the time
- * work practices followed
- * a description of the device being used (including type and brand)
- * protective equipment or clothing that was used at the time of the exposure incident (*gloves, eye shields, etc.*)
- * location of the incident (*O.R., E.R., patient room, etc.*)
- * procedure being performed when the incident occurred
- * employee's training

GECS Human Resources will record all percutaneous injuries from contaminated sharps in the Sharps Injury Log.

If it is determined that revisions need to be made, GECS Human Resources will ensure that appropriate changes are made to this ECP. (*Changes may include an evaluation of safer devices, adding employees to the exposure determination list, etc.*)

EMPLOYEE TRAINING

All employees who have occupational exposure to bloodborne pathogens receive training conducted by *Safe Schools and onsite training.*

All employees who have occupational exposure to bloodborne pathogens receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- * a copy and explanation of the standard
- * an explanation of our ECP and how to obtain a copy
- * an explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
- * an explanation of the use and limitations of engineering controls, work practices, and PPE

- * an explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- * an explanation of the basis for PPE selection
- * information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge
- * information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- * an explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
- * information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- * an explanation of the signs and labels and/or color coding required by the standard and used at this facility
- * an opportunity for interactive questions and answers with the person conducting the training session.

Training materials for this facility are available at GECS Human Resources and online.

RECORDKEEPING

Training Records

Training records are completed for each employee upon completion of training. These documents will be kept for at least **three years** at GECS Human Resources.

The training records include:

- * the dates of the training sessions
- * the contents or a summary of the training sessions
- * the names and qualifications of persons conducting the training
- * the names and job titles of all persons attending the training sessions

Employee training records are provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to

GECS Human Resources.

Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.1020, "Access to Employee Exposure and Medical Records."

GECS Human Resources is responsible for maintenance of the required medical records. These **confidential** records are kept at GECS Human Resources for at least the **duration of employment plus 30 years**.

Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to GECS Human Resources.

OSHA Recordkeeping

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 CFR 1904). This determination and the recording activities are done by GECS Human Resources.

Sharps Injury Log

In addition to the 1904 Recordkeeping Requirements, all percutaneous injuries from contaminated sharps are also recorded in the Sharps Injury Log. All incidences must include at least:

- the date of the injury

- the type and brand of the device involved

- the department or work area where the incident occurred

- an explanation of how the incident occurred.

This log is reviewed at least annually as part of the annual evaluation of the program and is maintained for at least five years following the end of the calendar year that they cover. If a copy is requested by anyone, it must have any personal identifiers removed from the report.

